## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

Application or Docket Number

Scall 1966 Co

TOTAL CLAIMS    Column 1   Column 2   TYPE			CLAIMS AS	FILED -	PART	Ļ		SMALL EN	NTITY		OTHER	THAN
FOR				(Column	: 1)	(Colu	mn 2)			OR		
TOTAL CHARGEABLE CLAIMS	TC	TAL CLAIMS		<u>(1.</u>				RATE	FEE	1	RATE	FEE
NOBPENDENT CLAIMS	FOR NUMBER FILED NUMBER EXTRA							BASIC FEE	370.00	OR	BASIC FEE	740.00
MULT PLE DEPENDENT CLAIM PRESENT	то	TA_ CHARGEA	BLE CLAIMS	X\$ 9=		OR	X\$18=					
### ADDITECT OF MULTIPLE DEPENDENT CLAIM    Minus	NE	DEPENDENT CL	AIMS	to mi	inus 3 =	1	<i>L</i> ·	X42=		1	V04	24.00
TOTAL OR TOTAL  CLAIMS AS AMENDED - PART II  (Column 1) (Column 2) (Column 3)  REMAINING AFTER PREVIOUSLY PAID FOR AMENDMENT PRESENT PREVIOUSLY PAID FOR AMENDMENT PRESENTATION OF MULTIPLE DEPENDENT CLAIM  CLAIMS RAMAINING PREVIOUSLY PAID FOR AMENDMENT PRESENT PREVIOUSLY PAID FOR AMENDMENT PRESENTATION OF MULTIPLE DEPENDENT CLAIM  CLAIMS REMAINING AMENDMENT PRESENT PRESENT PRESENTATION OF MULTIPLE DEPENDENT CLAIM  CLAIMS REMAINING AMENDMENT PRESENT PRESENTATION OF MULTIPLE DEPENDENT CLAIM  CLAIMS REMAINING AMENDMENT PRESENTATION OF MULTIPLE DEPENDENT CLAIM  CLAIMS REMAINING AMENDMENT PRESENTATION OF MULTIPLE DEPENDENT CLAIM  CLAIMS REMAINING AMENDMENT PRESENTATION OF MULTIPLE DEPENDENT CLAIM  CLAIMS ATTER  AMENDMENT PRESENTATION OF MULTIPLE DEPENDENT CLAIM  CLAIMS AMENDMENT PRESENTATION OF MULTIPLE DEPENDENT CLAIM CLAIMS AMENDMENT PRESENTATION CLAIMS AMENDMENT PRESENTATION	MU	JET PLE DEPEN	IDENT CLAIM PF	RESENT					<b> </b>	1		0 3
CLAIMS AS AMENDED - PART II   COlumn 3   COlumn 3   COlumn 3   COlumn 3   COlumn 3   COlumn 3   COlumn 4   COlumn 4   COlumn 5   COlumn 5   COlumn 5   COlumn 5   COlumn 6   COlumn 7   COlumn 7   COlumn 7   COlumn 7   COlumn 7   COlumn 8   Column 9   C	• 11	the difference	in column 1 is	less than zr	ero, ente	er"0" in c	column 2	L	<del> </del>	اتنا	L	114
Column 1   Column 2   Column 3   SMALL ENTITY   OR SMALL ENTITY							<del></del>	TOTAL	L	Он		
RATE   TIONAL   FEE		~-	(Column 1)	MLIVI	(Colu	ımn 2)	(Column 3)	SMALL	ENTITY	OR		
Column 1   Column 2   Column 3	ENT A		REMAINING AFTER		NUM PREVI	WBER KOUSLY		RATE	TIONAL		RATE	TIONAL
Column 1   Column 2   Column 3	MON	Total	14	Minus	-2	0_	=	X\$ 9=		OR	X\$18=	
Column 1   Column 2   Column 3	AME	ļl			(	I	191	X42=	<b> </b>	1	V04	504
Column 1)   Column 2)   Column 3)   Column 3   Column		FIRST PRESE	NTATION OF MU	JLTIPLE DEF	PENDEN	T CLAIM		1140=				-
(Column 1) (Column 2) (Column 3)  CLAIMS REMAINING AFTER AMENDMENT PARTICULARY PAID FOR STAR AMENDMENT								<u> </u>		1	TOTAL	ENI
REMAINING AFTER AMENDMENT  That:  Independent  Independen			(Column 1)		(Ca)	01	(Onto-na 2)			UK	ADDIT FEE	1207
REMAINING AFTER AMENDMENT  Total  Tot	_		CLAIMS		HIGH	HEST	(Column s)	<del> </del>	1001	1	<del></del>	
TOTAL  OR  TOTAL	ENT B	192	AFTER		NUM PREVI	MBER YOUSLY		RATE	TIONAL		RATE	TIONAL
TOTAL  OR  TOTAL	DIME		PHYSICIAN	Mirus		/FOr.	-	XS 9=	TEL		XS18=	755
TOTAL  OR  TOTAL	MEN	independent	•	Minus	***	**********	=		<b> </b>	1		<del></del>
TOTAL OR TOT	4	FIRST PRESE	NTATION OF MI	ULTIPLE DEI	PENDEN	T CLAIM		X42=	<b> </b> '	OR	X84=	1
CCAIMS REMAINING AFTEH AMENDMENT Total  Total  Independent  Minus  FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  Total	-						***************************************	+140=		OR	+280=	
CLAIMS REMAINING REMAINING AFTEH AMENOMENT ROLL AME										OR		
REMAINING AFTEH PRESENT EXTRA  AMENOMENT PRIOR PRESENT EXTRA  Total Minus ## = X\$ 9= OR X518=  Independent Minus ## THAT THAT IT APPRESENT TIONAL FEE TOWN THAT THAT THAT THAT THAT THE PRESENTATION OF MULTIPLE DEPENDENT CLAIM  If the entry in column 1 is less than the entry in column 2 write "0" in column 3 TOTAL  TOTAL OR TOTAL  TOTAL OR TOTAL  OR TOTAL  OR TOTAL  OR TOTAL							(Column 3)					
* If the entry in column 1 is less than the eritry in column 2 write "0" in column 3  ** If the entry in column 1 is less than the eritry in column 2 write "0" in column 3  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20 enter "20"  OR TOTAL  OR TOTAL	1.		REMAINING AFTEH		NUM FRE	MBER JOUGE		PATE	TIONAL		PATE	TIONAL
* If the entry in column 1 is less than the eritry in column 2 write "0" in column 3  ** If the entry in column 1 is less than the eritry in column 2 write "0" in column 3  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20 enter "20"  OR TOTAL  OR TOTAL	Ş Ş	Total	•	Minus	**		=	X\$ 9≈		OR	X518≃	
* If the entry in column 1 is less than the eritry in column 2 write "0" in column 3  ** If the entry in column 1 is less than the eritry in column 2 write "0" in column 3  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20 enter "20"  OR TOTAL  OR TOTAL	ME	Independent	*	_i							<b> </b>	<del>  </del>
* If the entry in column 1 is less than the entry in column 2 write "0" in column 3 TOTAL  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20 enter "20"  OR  TOTAL	4	FIRST PRESE	ENTATION OF MI	ULTIPLE DE	PENDEN	IT CLAIM		X4C=	<b> </b>	OR	X84=	<del>  </del>
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20 enter "20" ADDITION OF THE PROPERTY OF THE PROPER		· · · · · · · · · · · · · · · · · · ·	- transfer of		*		~	+140=		OR	+280=	
AMBIEN MEDICAL AND	•	" If the "Highest Nur	umber Previously Pa	aid For IN THI	IIS SPACE	is less tha	an 20. enter "20"	1		OR		
The "Highest Number Previously Paid Feir" (Total or Independent) is the highest number found in the appropriate box in column 1					<b></b>							